IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

IN RE	*	BKRTCY. NO. 19-03746 MCF
CYNTHIA VEGA VAZQUEZ	*	CHAPTER 7
DEBTOR	*	

DEBTOR'S NOTICE OF FILING OF AMENDED SCHEDULES "I" & "J" (OFFICIAL FORMS 106I & 106J)

TO THE HONORABLE COURT:

COMES NOW, CYNTHIA VEGA VAZQUEZ, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

- 1. The Debtor is hereby submitting *Amended Schedules "I" and "J" Official Forms 106I and 106J*, dated September 06, 2019, herewith and attached to this motion.
- 2. The Amended Schedule "I" is filed to include the Debtor's monthly household income, which income has been reduced to only rent income (\$1,100) and the Amended Schedule "J" is filed to state the Debtor's current household monthly expenses.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

Page -2-Notice of Amended Schedules "I" & "J" Case no. 19-03746 MCF7

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 7 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtor and to all creditors and interested parties appearing in the master address list, hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 6th day of September, 2019.

/s/Roberto Figueroa Carrasquillo
USDC #203614
RFIGUEROA CARRASQUILLO LAW OFFICE PSC
ATTORNEY FOR the DEBTOR
PO BOX 186 CAGUAS PR 00726
TEL NO 787-744-7699 FAX 787-746-5294
Email: rfc@rfigueroalaw.com

N-RIG	in this information to identify	your casa:			1			
		HIA VEGA VAZQUEZ						
	<u></u>	IIA VLGA VAZQOLZ						
	otor 2 use, if filing)							
Unit	ted States Bankruptcy Court	for the: DISTRICT OF PUER DIVISION	TO RICO, SAN JUAN	1				
Cas	e number 3:19-bk-37	46			Check if this is:			
(If kn	own)		_		An amende	d filing		
		v	is me			nt showing postpetition f the following date:	n chapter 13	
01	fficial Form 106I				MM / DD/ Y	YYY		
Sc	chedule I: Your	Income					12/15	
supp spou	olying correct information. use. If you are separated ar ich a separate sheet to this	s possible. If two married peop If you are married and not filin nd your spouse is not filing wi form. On the top of any addition	ng jointly, and your s th you, do not includ	spouse is livi le information	ng with you, includ n about your spous	e information about se. If more space is r	your needed,	
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse)	
	If you have more than one jo		☐ Employed	mployed		☐ Employed		
	attach a separate page with information about additional		Not employed		☐ Not en	nployed		
	employers.	Occupation						
	Include part-time, seasona self-employed work.	l, or Employer's name					102	
	Occupation may include stonemaker, if it applies.	udent or Employer's address						
		How long employed t	here?					
Par	t 2: Give Details Abo	ut Monthly Income						
	mate monthly income as of ss you are separated.	the date you file this form. If y	you have nothing to rep	oort for any line	e, write \$0 in the spa	ce. Include your non-f	iling spouse	
	u or your non-filing spouse ha e, attach a separate sheet to	we more than one employer, com this form.	bine the information for	or all employers	s for that person on t	he lines below. If you	need more	
					For Debtor 1	For Debtor 2 or non-filing spouse		
2.		s, salary, and commissions (be nthly, calculate what the monthly		2. \$	0.00	\$	4	
3.	Estimate and list monthly	overtime pay.		3. +\$	0.00	+\$N/A	<u> </u>	
4.	Calculate gross Income.	Add line 2 + line 3.		4. \$	0.00	\$ <u>N/A</u>		

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	VEGA VAZQUEZ, CYNTHIA	_	Case number (if known)	3:19-bk-37	46	
	Сор	y line 4 here	4.	For Debtor 1	For Debtor non-filing s		
5.	List	all payroli deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ 0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$ 0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$ 0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$ 0.00	\$	N/A	
	5e.	Insurance	5e.	\$ 0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$0.00	\$	N/A	
	5g.	Union dues	5g.	\$ 0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$0.00	. + \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 1,100.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$ 0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$ 0.00	\$	N/A	
	8e.	Social Security	8e.	\$ 0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$ 0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	\$ 0.00	\$	N/A	
	8h.	Other monthly income. Specify: Savings	8h.+		+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ 1,946.30	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	1,946.30 + \$	N/A	= \$ 1.94	16.30
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		1,040.00			10.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule use contributions from an unmarried partner, members of your household, your don't refine the friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not avoify:	ependen	anni eta ≢arrietari - Harrio (Alabaha da Saka Gorona Ekilipia		+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain				\$1,94	16.30
						Combined	
13.	Do y	you expect an increase or decrease within the year after you file this form'	?			monthly inco	ome
		Yes. Explain:					

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify you	ır case:				
Deb	otor 1 CYNTHIA VEC	GA VAZQUEZ		Check if	f this is:	
				1	amended filing	
	otor 2 ouse, if filing)	*****			supplement show benses as of the f	ing postpetition chapter 13 following date:
	ted States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, S	SAN JUAN		// DD / YYYY	
Cas	se number 3:19-bk-3746	- 1 H-1000				
	nown) 3:19-DR-3746	N SUSTAINE OF MARKET OF				
	fficial Form 106J					
S	chedule J: Your E	xpenses				12/15
info	as complete and accurate as p ormation. If more space is need known). Answer every question	ossible. If two married people and ded, attach another sheet to this another sheet to this and the sheet to the	e filing together, bot form. On the top of a	h are equally ro ny additional p	esponsible for s pages, write you	supplying correct ir name and case number
Par 1.	t 1: Describe Your Househols this a joint case?	old				
(2.5	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in	a separate household?				
	☐ No ☐ Yes. Debtor 2 must	file Official Form 106J-2, Expenses	for Separate Househ	old of Debtor 2.		
2.	Do you have dependents?	■ No				
	250 (VASOTONIA (U.V.) 15 942 1	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor	r 2	Dependent's age	Does dependent live with you?
	Do not state the				to medical majority	□ No
	dependents names.		-	p =		☐ Yes
						□ No □ Yes
			CARTON AND AND AND AND AND AND AND AND AND AN	-		□ No
						☐ Yes
						□ No
3.	Do your expenses include			ACTOR		☐ Yes
o.	expenses of people other tha yourself and your dependent					
	t 2: Estimate Your Ongoing	g Monthly Expenses			44	
exp		ır bankruptcy filing date unless y nkruptcy is filed. If this is a supp				
val	ue of such assistance and have	on-cash government assistance it e included it on <i>Schedule I: Your</i>		1		
(Of	ficial Form 106l.)				Your expe	enses
4.	The rental or home ownershi payments and any rent for the g	ip expenses for your residence. I ground or lot.	nclude first mortgage	4. \$ _	energia :	0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$ _		0.00
	4b. Property, homeowner's, o			4b. \$ _	ATTAIN AND AND AND AND AND AND AND AND AND AN	0.00
	 Home maintenance, rep. Homeowner's association 	air, and upkeep expenses n or condominium dues		4c. \$ - 4d. \$ -	7,13116	0.00
5.		nts for your residence, such as ho	me equity loans	5. \$		0.00

Debtor 1	VEGA VAZQUEZ, CYNTHIA	Case numl	er (if known)	3:19-bk-3746
6. Utilitie	s:			
	Electricity, heat, natural gas	6a.	\$	100.00
6b.	Water, sewer, garbage collection	6b.	\$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	80.00
6d.	Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	 7.	\$	140.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	15.00
25 ME 1040 COUNTY	nal care products and services	10.	\$	25.00
	al and dental expenses	11.		10.00
	portation. Include gas, maintenance, bus or train fare.	West	-	
	include car payments.	12.	\$	87.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
4. Charit	able contributions and religious donations	14.	\$	0.00
5. Insura)			3,00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	160.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	The second secon
Specif		16.	\$	0.00
	ment or lease payments:			
	Car payments for Vehicle 1	17a.	S. 1	456.00
17b.	Car payments for Vehicle 2	17b.	0.510	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
8. Your	payments of alimony, maintenance, and support that you did not report as	18.	œ.	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	s ———	
9. Other Specif	payments you make to support others who do not live with you.	19.	Φ	0.00
	real property expenses not included in lines 4 or 5 of this form or on Schedi		rIncome	
	Mortgages on other property	20a.		753.30
	Real estate taxes	20b.	103	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	70.00	40.00
	Homeowner's association or condominium dues	20d. 20e.	12/1	
				0.00
1. Other	: Specify:	21.	7-7	0.00
2. Calcu	late your monthly expenses			
22a. A	dd lines 4 through 21.		\$	1,946.30
22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	dd line 22a and 22b. The result is your monthly expenses.		\$	1,946.30
				1,040.00
	late your monthly net income.		•	
	Copy line 12(your combined monthly income) from Schedule I.	23a.		1,946.30
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,946.30
00-	Cubtract your monthly owners on from your monthly income			
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	0.00
	The result is your monthly net moonie.		July	17.50.00
Forexa	u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your	file this f mortgage p	orm? ayment to incre	ease or decrease because of a
	ation to the terms of your mortgage?		74	
■ No			8	
☐ Yes	Explain here:			

Debtor 1	CYNTHIA VEGA VAZQUEZ			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION	
Case number	3:19-bk-3746			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney	to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary that they are true and correct. X	x
CYNTHIA VEGA VAZQUEZ () Signature of Debtor 1 Date September 6, 2019	Signature of Debtor 2 Date

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Label Matrix for local noticing 0104-3 Case 19-03746-MCF7 District of Puerto Rico Old San Juan Fri Sep 6 08:34:18 AST 2019 UNITED STATES TRUSTEE

BANCO POPULAR DE PUERTO RICO
MORTGAGE COUNSELING AND BANKRUPTCY (762)
PO BOX 362708
SAN JUAN, PR 00936-2708

ISLAND PORTFOLIO SERVICES LLC AS SERVICING A PO BOX 361110 SAN JUAN, PR 00936-1110

UNITED STATES TRUSTEE 500 TANCA ST STE 301 SAN JUAN, PR 00901-1922

VAPR FEDERAL CREDIT UNION
C/O ISAYRA BAGUE DIAZ,ESQ.
PMB 181 PO BOX 4952
CAGUAS, PR 00726 CAGUAS 00726-4952

US Bankruptcy Court District of P.R. Jose V Toledo Fed Bldg & US Courthouse 300 Recinto Sur Street, Room 109 San Juan, PR 00901-1964

Bufete Bellver Espinosa Lcda, Krystal Santiago Sanchez El Centro 500 MRivera Ave Ste 801 San Juan, PR 00918-3331 Citibank, N.A. 701 East 60th Street North Sioux Falls, SD 57104-0493 (p) INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATIONS PO BOX 7346 PHILADELPHIA PA 19101-7346

Island Finance PO Box 71504 San Juan, PR 00936-8604 Mohela/Dept of Ed 633 Spirit Dr Chesterfield, MO 63005-1243 Pay Pal Credit PO Box 960006 Orlando, FL 32896-0006

(p)PORTFOLIO RECOVERY ASSOCIATES LLC PO BOX 41067 NORFOLK VA 23541-1067 Syncb/Jc Penney Pr PO Box 965007 Orlando, FL 32896-5007 Syncb/Sams Club DC PO Box 965005 Orlando, FL 32896-5005

Syncb/ppxtrm PO Box 965005 Orlando, FL 32896-5005 Synchrony Bank c/o PRA Receivables Management, LLC PO Box 41021 Norfolk VA 23541-1021 Synchrony Bank c/o of PRA Receivables Management, LLC PO Box 41021 Norfolk, VA 23541-1021

Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497 US Department of Education/MOHELA 633 Spirit Dr Chesterfield, MO 63005-1243 VAPR FEDERAL CREDIT UNION ISAYRA BAGUE DIAZ, ESQ.

PMB 181 PO BOX 4952 CAGUAS PR 00726-4952

Vapr Federal Credit Un 2400 Carr 177 Guaynabo, PR 00969-4779 CYNTHIA VEGA VAZQUEZ HC 05 BOX 56116 CAGUAS, PR 00725-9222 JOSE RAMON CARRION MORALES PO BOX 9023884 SAN JUAN, PR 00902-3884

MONSITA LECAROZ ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

NOREEN WISCOVITCH RENTAS PMB 136 400 CALAF STREET SAN JUAN, PR 00918-1314 ROBERTO FIGUEROA CARRASQUILLO PO BOX 186 CAGUAS, PR 00726-0186

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

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Internal Revenue Service PO Box 21126 Philadelphia, PA 19114-0326 Document Page 9 of 9
Portfolio Recovery Associates, LLC
POB 12914
Norfolk VA 23541

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d)BANCO POPULAR DE PUERTO RICO MORTGAGE COUNSELING AND BANKRUPTCY (762) PO BOX 362708 SAN JUAN PR 00936-2708 (d) ISLAND PORTFOLIO SERVICES LLC AS SERVICING End of Label Matrix PO BOX 361110 Mailable recipients SAN JUAN, PR 00936-1110 Bypassed recipients Total

26

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